SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent Addressee  B. Received by (Printed Name)  C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
GORDON GRIFFIN RED DOME INC 3912 KNOX CT	
BURLINGTON NC 27215-9835	3. Service Type  ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise
	☐ Insured Mail ☐ C.O.D.
EB 3.7-13 MIDZ7 0032	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7011 0110 0001 3568 0802	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1544	

UNITED STATES POSTAL SERVICE



First-Class Mail Postage & Fees Paid USPS Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

EMILY BERRY STATE OF UTAH DIVISION OF OIL GAS & MINING PO BOX 145801 SALT LAKE CITY UT 84114-5801

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